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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF HEALTH PROFESSIONS
RAE RAMSDELL
DIRECTOR

STEVEN H. HILFINGER
DIRECTOR

**Advisory Committee on Pain and Symptom Management (ACPSM)
Meeting Minutes
May 4, 2012**

Members in attendance:

Lawrence Ashman, DDS
Marie Atkinson, MD
Daniel Berland, MD
Dorothy Deremo
Lisa Gigliotti
John Jerome, PhD
Jody Kohn, MSW
Jeanne Lewandowski, MD
Lawrence Prokop, DO
Rae Ramsdell, Chair
Steven Roskos, MD
Claire Saadeh, Pharm D, BCOP
Karel Schram, PA-C

Representing/Appointed by:

Michigan Board of Dentistry
Wayne State University
Michigan Board of Medicine – pain specialist
Michigan Hospice & Palliative Care Association
Person Suffering with Chronic Pain
Michigan Board of Psychology
Public Member
Michigan Board of Medicine – primary care
Michigan State University/College of Osteopathic Medicine
LARA/Bureau of Health Professions
Michigan State University/College of Human Medicine
Michigan Board of Pharmacy
Physicians Assistants Task Force

Members absent:

Dennis Dobritt, DO	Michigan Board of Osteopathic Medicine & Surgery – pain specialist
Carmen Green, MD	University of Michigan School of Medicine
William Morrone, DO	Michigan Board of Osteopathic Medicine & Surgery – Primary care
April Hazard Vallerand, PhD, RN	Michigan Board of Nursing

Visitors in attendance:

Andrew Biegner	Michigan Association of Nurse Anesthetists
Kay Felt	Attorney
Steve Welch	Millennium Laboratories
Brian Williams	Millennium Laboratories

Department staff in attendance:

Susan Affholter	Nirva Civilus
Steve Creamer	Deb Ingraham
Steve Kline	Sue Willers
Michael Wissel	

The meeting was called to order at 9:32 a.m.

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Welcome and Introductions – Director Rae Ramsdell:

Rae Ramsdell welcomed all members to the Advisory Committee on Pain and Symptom Management (ACPSM) meeting. Introductions were made around the table. There were two new members present; Karel Schram PA-C, Physicians Assistants Task Force, and Marie Atkinson, M.D., Wayne State University.

A packet of information was handed out to all members and staff. This packet included the November 18, 2011 meeting minutes, ACPSM Member Roster, the history of the committee, A Statement by the Board of Medicine and Board of Osteopathic Medicine and Surgery Regarding Certification for Medical Use of Marihuana by Michigan Physicians, A list of ACPSM Recommendations for the FY 2012-FY2013 Period, and a Draft BHP/ACPSM FY 2011 Annual Report.

A motion to approve the November 18, 2011 annual minutes was made by Lisa Gigliotti and seconded by Claire Saadeh. Lisa Gigliotti asked that the term chronic pain sufferer be changed to person suffering with chronic pain. The minutes were approved by consensus.

Discussion of the ACPSM Recommendations for the FY 2012-FY2013 included Dr. Lewandowski's mention that an annual ACPSM report is required by statute. Steve Creamer stated that the Bureau is also required to do an annual report, and since the Professional Practice Section is included in that Bureau report, we will begin incorporating the ACPSM report into the Bureau's annual report. This will be a more concise way of meeting the statute and can also be posted on the pain management website. Dr. Roskos suggested MAPS data be included in future ACPSM annual reports.

A final draft of the FY2012-FY2013 ACPSM recommendations was shared with the committee by Rae. A motion to approve these recommendations was made by Dr. Roskos and seconded by Jody Kohn.

Steve Creamer thanked Lisa Gigliotti for editing the history of the committee document and Dr. Lewandowski noted that one of the bullets listed on this document was a 2001 recommendation of the Michigan Commission on End of Life Care to eliminate the OPP program and that the committee had accomplished that. The OPP program was replaced with the electronic monitoring program (MAPS).

Rae informed members that the "Statement by the Board of Medicine and Board of Osteopathic Medicine and Surgery Regarding Certification for Medical Use of Marihuana by Michigan Physicians" was submitted to both medical boards for their review and the final approved statement will be distributed to all physicians and posted on the web site. It is expected by both boards that all physicians will have a face to face meeting with this patient, and the doctor will maintain these medical records. There are some physicians that are not complying with these standards, and the state will be pursuing disciplinary action against them in the future.

The formation of a Medical Marijuana Review Panel to consider citizen petitions for new conditions that qualify for medical marijuana was stipulated in the original legislation. Rae noted that because of the high number of patient and caregiver applications, the State delayed forming the panel. We are now going forward with the review panel and have contacted people who submitted previous requests and have required that they now submit a formal petition form at this time. Rae stated that sixteen other states have medical marijuana programs, and vast majority of new conditions proposed to them for inclusion in their law have not been approved.

ACPSM Subcommittee Reports/Discussion:

Steve Creamer discussed the confusion regarding the sub-committee names. He asked that everyone note the correct subcommittee names: 1) Professional Education Subcommittee, 2) Pre-Professional Education Subcommittee, 3) Health Consumer Education Subcommittee, and 4) Pain Management Website Subcommittee.

Health Consumer Education Subcommittee Report

Steve stated that the Professional Education Subcommittee did not meet in April because the members of the sub-committee could not agree on a time. Susan Affholter will be staffing this subcommittee in the future. This sub-committee will be working on the Professional Toolkit and other projects related to professional education. It will also review draft PSAs for the media campaign.

MAPS Update - Mike Wissel:

Mike Wissel gave an overview of MAPS news:

- ✚ As of May 1, 2012 we broke the barrier of 20,000 users. However, we could have 60,000 users. We are constantly doing things to encourage use.
- ✚ Insurance Companies can now have access to MAPS if they have a demonstrated need. We have had 15-20 insurance companies sign up. We can monitor the type of access they have.
- ✚ We have an automated letter written for "Doctor Shopping." If someone has six prescriptions from six different doctors, the doctors get the letter. In March of 2011 we sent physicians 2144 letters. In March 2012 we sent out 1799 letters. We have identified the physician with the highest number at 50 shoppers. Some have 30-40 shoppers. One physician claimed no responsibility.
- ✚ We have the capability to move to electronic messaging with the L2K program but we do not have email for all users.
- ✚ Doctor Shopping legislation has passed, identifying three groups: 1) abuse 2) abuse and selling 3) just selling. The legislation makes it a 4-year felony or a

\$5000 fine or both. The court could also place a doctor without previous convictions under probation (7411). The court may also order treatment for the patient.

- ✚ We have identified the biggest loss of prescription pain medication to pharmacy technicians. Michigan is one of the only states that do not license pharm techs.
- ✚ We are partnered with Medicaid, Dr. Debbie Eggleston, to identify people on Medicaid who have an abuse problem and do patient interventions. They are referred to a social worker to assess and manage.
- ✚ The Data sharing Hub of the National Association of Boards of Pharmacy continues to add states that can share prescription information.

The committee suggested a blog be created for MAPS.

Health Consumer Education Subcommittee Report

Jody Kohn, MSW reported on the Health Consumer Education Subcommittee. Subcommittee members are: Steve Creamer - staff appointee, Dorothy Deremo - MI Hospice & Pall Care Association, April Vallerand, PhD, RN, Lisa Gigliotti – Public Member, Jody Kohn, MSW – Public Member, Stephanie Gilkey, MS, PA-C, and Lynn Jenkinson.

The subcommittee discussed the idea of how to talk about pain and self-care, and how best to reach people. They discussed the use of brochures, posters, public service announcements, using medical support groups, blogs, posting information on other web sites, linking to Face Book, Twitter, and You Tube. Jody reported that since September is pain awareness month the subcommittee would like to launch the campaign in September.

A Health Consumer Tool Kit content was discussed, and it was suggested we look at other organization's tool kits. The subcommittee decided it should include three main messages:

1. Pain can be managed.
2. You are not alone.
3. Support and information is available, which can empower.

Pre-Professional Education Subcommittee Report

Steven Roskos, MD reported on the Pre-Professional Education Subcommittee. Subcommittee members are: Susan Affholter- staff appointee, Lawrence Ashman, DDS, Henry Beckmeyer, MD, RuthAnn Brintnall, PhD, RN, Harlan Holman, Alan Lewandowski, PhD, Jeanne Lewandowski, MD, William Morrone, DO, Steve Roskos,

MD, Claire Saadeh, Pharm.D., Sunitha Santhakumar, MD, Michael Stellini, MD (past member), Karel Schram, PA, Mike Wissel, BHP staff.

The subcommittee handed out the draft Model Core Curricula on Pain Management for Michigan Medical Schools. Dr. Roskos stated that the impetus for this is that many Michigan physicians report (on our State surveys) that they feel inadequately trained in pain management. At the Summit in May 2011, we presented our thoughts and the model curriculum based on the International Association's Study of Pain. The subcommittee wants curriculum categories and topics without too much detail. We want a broad document that won't tell educators how to develop their specific curriculum, but rather what should be some part of their curriculum. He reported that we will soon have a document to send to medical schools and post on the State pain management web site.

Discussion around Model Core Curricula concluded that this curriculum could be multi-disciplinary in structure, so that it is applicable to more than just medical schools. Dr. Jerome asked that every member take ownership of it and add bio-psycho-social aspects as it pertains to their discipline. Ms. Deremo suggested that "suffering" is a better term than "pain", and urged that cultural considerations be included in the curriculum.

Public Service Announcement Presentation – Nirva Civilus

Nirva Civilus from the LARA Office of Communications shared the administration's desire for its various offices to share their success stories. She suggested that the Bureau and the ACPSM has many success stories. She presented three draft pain management public service announcements (PSAs) her office developed. Two were for television and one was for radio. Comments/suggestions from the committee included:

- Use "persistent" pain as opposed to "chronic" pain
- They send a good message – appropriate treatment is not always medication.
- The fitness message is very good.
- The self-empowerment message is excellent.
- The word "LARA" needs to be smaller, that is the first thing you see.
- Repeat the website URL- one time is not enough.
- Keep the positive message in all PSAs.
- We liked the content and the variety of treatments mentioned- not focused on just drugs.

Sue Willers from LARA Office of Communications announced that our jointly produced DVD *MAPS and Effective Pain Management* just won a 2012 Gold Hermes Creative Award.

Steve Klein of the LARA Communications Office spoke about the TV and radio spots. He stated there are approximately 40 Broadcast TV Stations, 300 Radio Stations, and 90 Cable TV Stations will be target for PSA distribution. Because we are a government

entity we should be provided with free spots by these media outlets. He will also put them on LARA's You Tube, Facebook, and Twitter feeds, as well as the digital signage in the Unemployment Offices. Lisa Gigliotti asked if it was legal to give one of our PSAs to other organizations to link on their web sites- Mr. Kline indicated that was no problem.

Nirva stated that there are ten major radio markets and eleven major television viewing markets. She talked about this media campaign being a way to start the conversation and bring awareness of the problem of pain to the public. The campaign will start in September during pain awareness month, and would be aired for several months.

Doing morning talk shows, distributing a press release, and including a social media component were discussed, and Nirva said media training would could be provided to any staff or ACPSM member so that no one would go on a talk without adequate prep and a consistent agreed upon message.

Travel Reimbursement – Deb Ingraham:

Deb Ingraham, Secretary for the Professional Practice Section, stated that she had passed out travel vouchers at the previous meeting, and offered that anyone wanting to submit their mileage for reimbursement could see her and she would email them a voucher.

Adjourn

Steve Creamer gave a brief review of ongoing bureau efforts.

- We will continue to distribute the Responsible Opioid Prescribing Booklet (ROP). It is being revised and will broaden to a guide for "clinicians". We have ordered enough booklets for two years of distributing to all newly licensed prescribers and distributors of pain medication, beginning this summer.
- The MAPS DVD will be updated in FY2013, but we will be sending out the current version to licensees this summer.
- The Pain Management newsletter will go out within the next two months.
- On Friday, September 14, 2012 the annual Pain Management and Palliative Care Assembly will take place in Howell. Dr. Fishman will be returning as the featured speaker. Former ACPSM member Dr. Dan Clauw will also present.
- Subcommittees will continue to meet.

The next full committee meeting will be Friday, November 2, 2012.

The meeting was adjourned at 12:13 p.m.